

Volunteer Application Form

Name

Maiden Name (if Applicable)

Current Address:

Previous Addresses
Over last 5 years *

Date of Birth Place of Birth

Contact Number

Email Address

Previous work/Voluntary experience and relevant qualifications

* This information is required for vetting purposes if working with any affiliated organisations on any co-organised sports or should you wish to work directly with a disability organisation that require this information.

Please supply the names of two responsible people whom we can contact and who from personal knowledge are willing to endorse your application. If you have been previously involved in a sports club(s) please ensure that one of these references are from the sports club(s).

Name

Address

Tel

Position

Name

Address

Tel

Position

Other relevant Information (Reason for applying for volunteer position, hobbies and interests)

How did you hear about the volunteer opportunities?

(Newspaper, disability organisation Local Sport Partnership website, volunteer centre, school Word of mouth etc)

I hereby declare that the information provided is the truth to the best of my knowledge and that I make this declaration knowing that I have no previous criminal convictions.

Signature: _____

Date: _____